

PART B - FEE(S) TRANSMITTAL

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25224 7590 09/27/2006

MORRISON & FOERSTER, LLP
555 WEST FIFTH STREET
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Melody E. Green (Depositor's name)
 (Signature)
November 21, 2006 (Date)

11/27/2006 FNETEK12 00000050 031952 10050730

01 FC:1501 1400.00 DA					
02 FC:1504 PUBLICATION FEE 300.00 DA	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
03 FC:0001 30.00 DA	10/050,730	10/26/2001 Junichi Fujimori	393032028700	7708	

TITLE OF INVENTION: COMMUNICATION CONTROL APPARATUS AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/27/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DAVIS, CYNTHIA L	2616	370-312000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list:

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

YAMAHA CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hamamatsu-Shi, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10

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- ☐ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1952 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 
Typed or printed name DAVID L. FEHRMAN

Date November 21, 2006

Registration No. 28,600

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